

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	R M		10-16-01
O.I.P.E. CLASSIFIER			10-16-01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	TD	JC1125	11/16/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 □ Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	10-16-01
2	✓	✓	10-16-01
3	✓	✓	10-16-01
4	✓	✓	10-16-01
5	✓	✓	10-16-01
6	✓	✓	10-16-01
7	✓	✓	10-16-01
8	✓	✓	10-16-01
9	✓	✓	10-16-01
10	✓	✓	10-16-01
11	N	N	
12	N	P	
13	N	H	
14	N	N	
15	N	N	
16	W	N	
17	W	N	
18	W	J	
19	W	J	
20	N	J	
21	✓	N	
22	W	N	
23	N	N	
24	N	N	
25	✓	N	
26	✓	N	
27	N	N	
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If more than 150 claims or 10 actions
staple additional sheet here

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10-16-01